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UNITED NATIONS POPULATION FUND
PROPOSED PROJECTS AND PROGRAMMES

Recommendation by the Executive Director
Assistance to the Government of Mali
Support for a comprehensive population programme

Proposed UNFPA assistance:	$5.2 million, of which $3.2 million would be programmed from UNFPA regular resources. UNFPA would seek to provide the balance of $2 million from a combination of UNFPA regular resources and other resources, including multi-bilateral resources, when and to the extent such additional resources become available.
Estimated value of the Government's contribution:	To be determined
Duration:	Four years
Estimated starting date:	January 1993
Executing agencies:	Government of Mali United Nations and United Nations agencies and organizations National and international non-governmental organizations (NGOs)
Government coordinating agency:	Ministry of Finance, Economy, and Planning

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Mali

Demographic facts

Population (000)	
Total	9,214
Males	4,522
Females	4,692
Sex ratio (/100 females)	96.4
Urban	2,193
Rural	7,021
Per cent urban	23.8
Population in year 2000 (000)	12,561
Functional age groups (%)	
Young child: 0-4	19.6
Child: 5-14	27.3
Youth: 15-24	19.3
Elderly: 60+	4.2
65+	2.6
Percentage of women aged 15-49	44.3
Median age (years)	16.5
Dependency ratios: total	98.8
(/100) Aged 0-14	92.9
Aged 65+	5.1
Agricultural population density (/hectare of arable land)	3.6
Population density (/sq. km.)	7

Average annual change (000)	
Population increase	317
Births	508
Deaths	191
Net migration	0
Annual population total (% growth)	3.17
Urban	5.66
Rural	2.33
Crude birth rate (/1000)	50.7
Crude death rate (/1000)	19.1
Net migration rate (/1000)	..
Total fertility rate (/woman)	7.10
Contraceptive prevalence rate (% 15-44)	5
Gross reproduction rate (/woman)	3.50
Net reporduction rate (/woman)	2.39
Infant mortality rate (/1000)	159
Maternal mortality rate (/100,000)	1750
Life expectancy at birth	
Males	44.4
Females	47.6
Both sexes	46.0
GNP per capita (U.S. dollars, 1990)	270

Sources: Population density on arable land is derived from two publications issued by the Food and Agriculture Organization of the United Nations: FAO Production Yearbook 1985 and World-wide Estimates and Projections of Agricultural and Non-Agricultural Population Segments 1950-2025, ESS/MIS/86/2; gross national product per capita: World Bank, World Development Report 1992. Figures for population, total population by sex, population by age group, age indicators, urban-rural population, and population density (/sq. km.) refer to the year 1990; figures for average annual change, rate of annual change, and fertility and mortality are the five-year averages for 1990-1995. These data are from the Population Division, Department of Economic and Social Development of the United Nations, World Population Prospects: 1992. Two dots (..) indicate that data are not available.

I. SUMMARY

1. The United Nations Population Fund (UNFPA) proposes to support a comprehensive population programme in the amount of $5.2 million, of which $3.2 million would be programmed from UNFPA's regular resources, over a four-year period, starting January 1993, to assist the Government of Mali in achieving its population and development objectives. UNFPA would seek to provide the balance of $2 million from a combination of UNFPA regular resources and other resources, including multi-bilateral resources, when and to the extent such additional resources become available.

2. The proposed programme for the period 1993-1996 is based on: (a) the overall goals and objectives of the country's national population policy adopted in May 1991; (b) the findings and recommendations of a UNFPA Programme Review and Strategy Development (PRSD) mission that visited Mali in May and June 1992; (c) the lessons learned during the implementation of the two previous programmes; and (d) extensive consultations with national authorities and non-governmental organizations (NGOs) on programme priorities.

3. The immediate objectives of the proposed programme are: (a) to help reduce the population growth rate by promoting family planning; (b) to reduce maternal and infant mortality; (c) to assist the Government in elaborating and implementing a strategy to enhance the integration of women into the development process; and (d) to make accurate data on mortality and migration available for national development planning.

4. All projects under this proposed programme, as in all UNFPA-assisted programmes, would be undertaken in accordance with the principles and objectives of the World Population Plan of Action; that is, that population policies should be consistent with internationally and nationally recognized human rights of individual freedom, justice and the survival of national, regional and minority groups (para. 14(d)); that respect for human life is basic to all human societies (para. 14 (e)); and that all couples have the right to decide freely and responsibly the number and spacing of their children and to have the information, education and means to do so (para. 14(f)).

II. BACKGROUND

5. Demographic trends. With a land area of approximately 1.25 million square kilometres (less than 40 per cent of which is arable), Mali is one of the five biggest countries of sub-Saharan Africa. According to projections based on the 1987 census, the present population is 8.5 million inhabitants, 80 per cent of whom live in rural areas. (See the demographic fact sheet on p. 2 for United Nations estimates.) Women make up 51 per cent of the total population; 38 per cent (1.65 million) of Malian women are of reproductive age. With an annual natural growth rate of over 3 per cent, the population is projected to reach 23 million by the year 2020.

6. The country's constantly changing climatic conditions and the continuous process of desertification (currently 60 per cent of the national territory) divide the country into two sharply differentiated regions: arid and semi-arid in the north (Gao, Tombouctou, Kidal) where population density is barely 1 inhabitant per square kilometre; and the central and southern regions (Mopti, Sikasso, Segou, Koulikoro, Kayes and Bamako), with an average population density of 10 inhabitants per square kilometre. Internal migration from rural to urban areas and from north to south has contributed to a sharp growth in the urban population (which currently constitutes 20 per cent of the total) and has led to acute pressure on urban social services. Migration abroad has deprived the country of important skills and competence that are badly needed for the country's socio-economic development.

7. Since Independence in 1960, Mali has witnessed a sharp reduction in the infant mortality rate, declining from 250 per 1,000 to 102 per 1,000 in 1991 and an increase in life expectancy from 35 years to 55 years in 1991. In spite of the fairly large number of health facilities (769 urban, peri-urban and rural health units) and the Government's efforts to improve health services and child survival over the years, maternal and infant mortality rates are still relatively high in comparison with other West African countries; modern contraceptive prevalence is only 1.2 per cent; 50 per cent of deaths among women of child-bearing age are due to childbirth; and adolescent pregnancies and clandestine abortion are still widespread.

8. Economic and social factors. Mali's economy is based mainly on agriculture and fishing, with an average annual per capita income of $270. At the beginning of the last decade (1980), the Malian economy was in structural crisis due mainly to unfavourable external factors. The remedial measures taken from late 1982 in liberalizing the economy and instituting management reforms were interrupted as a result of the widespread drought and the fall in the world market price of cotton in 1985. From 1988, the Government committed itself to a medium-term structural reform programme covering the liberalisation of the economy, reform of the public enterprise sector and the improvement of the management of public resources.

9. Mali has made considerable improvements in the health sector since Independence in 1960. However, 70 per cent of deaths among children under age five are attributable to infectious and parasitic diseases; the standards of nutrition are falling; only 25-30 per cent of the population have access to a fixed health facility; only 56 of the 769 fixed health facilities provide family planning services; and only 40 per cent of the population have access to potable water. Although sexually transmitted diseases (STDs), especially AIDS, are on the increase, there has been a lack of willingness on the part of international donors to provide assistance to combat their spread because of a perceived lack of commitment on the part of national authorities. Furthermore, the operational activities of the national health programme, in terms of planning, staff allocations, supervision, collaboration with NGOs, coordination, and logistics, leave much to be desired, especially in rural areas where family planning services are hardly available, NGO involvement is minimal, and logistics management is very weak.

10. The Government has also made efforts to make the public education system generally accessible. Between 1960 and 1987, school enrolment increased from 9 per cent to 27 per cent of children of school age; investment in the education sector doubled (from 13.8 per cent to 27 per cent of the total national budget) between 1968 and 1987. Despite the Government's efforts in this sector, the enrolment rate of children of school age remains low: in 1990-1991, it was 19.1 per cent for girls and 38 per cent for boys. Adult literacy is 27 per cent for men and 11 per cent for women.

11. Although successive governments have attempted to improve the health and economic and social status of Malian women, sociocultural barriers to their advancement still exist. These barriers include the early age of women at first marriage (average of 15.7 years), pro-natalistic attitudes, polygamy and female circumcision. In addition, women also need their husbands' consent to use contraception and are adversely affected by discriminatory family and inheritance laws.

12. Having recognized the need to integrate demographic variables into development planning in order to achieve a balance between the population growth rate and available resources, the Government declared a national population policy on 8 May 1991, with the goal of improving the standards of living and quality of life of the Malian population through improvements in education, health, food, employment and housing. Efforts are currently being made to elaborate an action plan to implement the population policy and create appropriate central and regional structures.

III. REVIEW OF UNFPA AND OTHER ASSISTANCE TO DATE

13. UNFPA assistance to Mali started in 1974 on a project-by-project basis. The first comprehensive country programme was approved by the Governing Council in 1979 for a total amount of $4.5 million. By 1992, UNFPA had allocated approximately $7.7 million for population activities in the country, covering all areas of the Fund's mandate.

14. UNFPA assistance has produced some encouraging results, such as the Government's strong commitment to population issues, which culminated in the recent adoption of the national population policy; a high level of national execution of UNFPA-funded programmes (80 percent over the period 1987-1992); and increased knowledge of UNFPA's role in promoting the population policy as well as increased cooperation among donor agencies in the population field.

15. However, UNFPA programme development and implementation were hampered by a number of problems and constraints. The most important ones were: (a) the continued existence ot the 1920 French colonial law prohibiting family planning; (b) negative sociocultural attitudes towards family planning; and (c) weak or inadequate structures for population policy implementation. Others included: (a) disruption of the previous programme because of country-wide socio-political disturbances in January-March 1991 and the Tuareg uprising of 1991-1992; (b) ineffective institutionalization of the Population Programme Unit, which has resulted in poor coordination of population activities and of donor assistance; (c) the social effects of the country's structural adjustment programme; and (d) bureaucratic delays in providing government contributions towards programme implementation.

Maternal and child health and family planning

16. UNFPA assistance for MCH/FP activities amounted to approximately $2.4 million for the period 1979-1992. The Fund's support enabled the Government to formulate a national MCH/FP programme and to create the Family and Community Health Division to conceptualize, orient and coordinate programme activities. It also facilitated the integration of family planning into the MCH infrastructure in 56 urban and peri-urban health units in the five southern regions (Kayes, Koulikoro, Sikasso, Segou and Mopti) through the training of nearly 1,000 local medical and paramedical personnel in MCH/FP service delivery, contraceptive technology, IEC techniques and health data collection, and of 40 senior cadres through fellowships in gynaecology, health education, public health and family planning.

17. UNFPA's support to renovate and equip MCH centres in Kayes and Sikasso regions, and to provide contraceptives and medical kits to MCH units, quickened the pace of the integration of family planning into MCH units, thereby making family planning services more widely available. The production of IEC materials in local languages through assistance for the expanded programme of immunization (EPI) also helped the family planning motivation campaigns. The introduction of family planning into the curricula of the public health institutions helped to produce over 300 trained service providers. Support to the national AIDS programme in connection with STD activities holds out the hope of reducing the incidence of sexually transmitted diseases. Furthermore, a February 1991 workshop funded by UNFPA on government and NGO collaboration provided a good forum for an exchange of views on ways to make donor collaboration more effective.

18. Despite these successes, the MCH/FP programme is still faced with various problems and weaknesses, the most important of which are: (a) sociocultural constraints on family planning activities; (c) the

unavailability of family planning services in rural areas; and (c) inadequacy of monitoring and evaluation mechanisms. Other problems include: (a) the confirmed high incidence of clandestine abortion, teen-age pregnancy, and excision; (b) the inequitable allocation of health personnel between urban and rural areas; (c) high turnover of staff; (d) underutilization of local research institutions (e.g. Centre d'études et de recherche sur la population pour le développement (CERPOD) and the National Institute for Research on Public Health); (e) the generally poor quality of technical back-stopping; and (f) inadequate allocations to MCH/FP in the health budget.

Information, education and communication

19. In the area of population IEC, UNFPA has supported activities aimed at increasing the awareness of national authorities and the general public about Safe Motherhood, the advantages of birth spacing, the relationships between the population growth rate and available resources, and responsible parenthood. UNFPA assistance to this sector amounted to over $2.0 million for the period 1979 to 1992.

20. In the area of formal education, UNFPA assistance helped to introduce family life and population education into the formal school system. It also enabled the Government to establish a multi-disciplinary Population Education Unit in the Ministry of Education, provide technical training for senior cadres, conduct a sociocultural survey, and elaborate a family life and population education programme. These activities culminated in the development of a curriculum for subsequent experimentation in selected schools. Apart from administrative bottlenecks inhibiting the provision of adequate office space for the Population Education Unit and delays in completing the sociocultural survey, UNFPA did not encounter major problems in this sector. However, a large proportion of the population within the 10-25 year age bracket remains outside the formal education system. They lack the necessary rudiments of basic literacy that is the fundamental requirement in making them aware of population issues and of understanding the need for responsible parenthood.

21. In the non-formal IEC sector, UNFPA provided assistance to train journalists, conduct training courses in family life education for women and cooperatives, organize sensitization seminars on various population-related issues, and produce audio-visual materials and functional literacy programmes. While such efforts have considerably increased awareness about population problems among policy makers, they have been much less successful among the general public, especially those living in rural areas. Indeed, there is no global IEC strategy for the country, and IEC activities tend to be uncoordinated and unfocused. The participation of the media in the area of population communication has been quite modest, due partly to poor coordination, partly to lack of motivation, and partly to the obvious fear of the implications of the 1920 French colonial law prohibiting dissemination of family planning information.

Data collection and analysis

22. UNFPA assistance helped to establish the principal sources of population data in Mali, particularly the first and the second population censuses of 1976 and 1987. The 1987 census was conducted entirely by national experts. The final 1987 census results were published in eight volumes and disseminated at a national seminar in October 1991 although some of the results (especially infant mortality and migration rates) provoked a controversy due to unreliable data. UNFPA also supported efforts to improve the country's civil registration system by providing training and supplying registers and equipment. Within two years of their establishment, the civil registration centres had registered an estimated 50 per cent of all births, marriages and deaths and had undertaken sample surveys in the nomadic zones. Particular attention was paid to the analysis

and publication of the data collected, as well as to the dissemination of tabulated results. These achievements were marred by the wilful destruction of civil registration registers and materials during the socio-political events of March 1991. Moreover, the system has still not been able to cope with such problems as the wide dispersion of the population over vast stretches of territory, difficult and expensive communications and transportation, and the absence of legislation on civil registration in the nomadic zones.

Population policy formulation

23. UNFPA assistance in the area of population policy formulation started in 1981. A Population Unit was subsequently established in 1983, with the mission of assisting the Government in formulating a national population policy and developing a coherent framework for population activities in Mali. With UNFPA financial assistance and with the International Labour Organisation (ILO) as executing agency, the Population Unit undertook all the necessary spadework for elaborating and defending the population policy. This included making the necessary baseline surveys and other studies, creating the inter-ministerial Consultative Group on Population (GECAPOP), preparing the draft population policy and then sponsoring the seminars and other awareness-creation activities that led to its adoption.

24. Thanks to the efforts of the UNFPA-supported Population Unit, on 8 May 1991 the Government of Mali adopted a national population policy designed to improve the standards of living and quality of life of the Malian population through education, health, employment, food and housing. UNFPA has continued to support the Population Unit in efforts to elaborate sectoral plans and a priority investment programme to facilitate the implementation of the national population policy. A comprehensive evaluation of the performance of the whole population policy sector was undertaken in November 1992 in order to determine how and to what extent UNFPA would provide future assistance for this sector. UNFPA also participated in the joint funding of the donors' round table in late 1992, whose aim was to share financial support for the implementation of the national population policy. The Population Unit is still faced with the inadequacy of its staffing, office space and data-processing equipment. The slow pace of integration of the Population Unit within the Government's institutional framework has been partly responsible for the Unit's inability to effectively coordinate population activities, particularly those of international donors.

Women, population and development

25. The first phase of UNFPA assistance to Mali supported a survey on the problems affecting the health and status of women in Mali, including female circumcision, abortion and teen-age pregnancy, among others. The survey presented a general analysis on the major causes and effects of these problems as well as the opinions of Malian society. There is, however, no quantified information on the scope or extent of the problems discussed. The survey found that female circumcision is practiced among all tribes in Mali. Abortion was found to be common and to have such grave consequences as infertility, sterility, death, haemorrhage and chronic infections. Most of the people who practice abortion, by both traditional and modern methods, have no knowledge of contraception and sex education. The survey also found that the number of teenage pregnancies had escalated since Independence in 1960. Among the reasons for this was the inaccessibility or unavailability of family planning information and services. The study made a number of recommendations for addressing the problems cited and working to improve women's health and status generally. These included expanding family life education and making family planning information, education and services available and accessible to all Malians. The results and recommendations of this study were disseminated during regional and national seminars organized in 1985 and were used for subsequent programme development.

26. The second phase of UNFPA assistance in the area of women, population and development was geared towards strengthening the National Union of Malian Women (UNFM) through family life education, with a view to improving women's living conditions and their participation in population and family welfare programmes. Support was provided for various workshops and seminars as well as technical assistance for programme implementation and management. After March 1991, UNFPA assistance was directed to the newly created State Secretariat for Women's Promotion. Support was provided to organize the Women's Forum and a series of consultations culminating in the adoption of a national policy for women's development.

Other external assistance

27. UNDP, the United Nations Children's Fund (UNICEF) and the World Bank are the other major multilateral donors supporting population activities in Mali. UNDP supported the second population census in 1987 and plans to provide assistance for women's activities, health education and environmental management in its 1992-1996 programme. UNICEF's assistance amounted to $41.6 million for the period 1988-1992 while its next (1993-1997) programme of assistance is estimated at $40 million. Support is to be provided for primary health care, basic education and women's development in selected regions of the country. The World Bank has provided a loan of $48 million to strengthen the education sector, especially primary education, and has pledged $26.6 million towards the second Health, Population and Rural Water Supply project.

28. Among bilateral donors the United States Agency for International Development (USAID) has pledged $15.7 million to the Community Health and Population Services project for the period August 1991 to September 1998. USAID also supports integration of MCH/FP services into primary health services in urban areas, an HIV/AIDS prevention project, the Child Survival Initiative and a child survival and family planning project in Kolondieba. USAID also assists a number of other reproductive health projects through various NGOs. The coordination of donor assistance, both by the Government's Population Unit and among donors, has been neither effective nor efficient.

IV. PROPOSED PROGRAMME 1993-1996

29. The immediate objectives of the proposed UNFPA programme are stated in paragraph 3 above. The programme strategy designed to achieve these objectives would focus on: (a) integrating the goals and objectives of the national population policy into all development programmes and projects; (b) strengthening institutional capacities of government agencies and NGOs to implement population programmes and coordinate donor assistance; (c) strengthening and expanding family planning services in urban, peri-urban and rural areas; (d) elaborating a comprehensive, intersectoral population IEC programme targeted to specific priority groups, including men, women, youth, newlyweds and political and religious leaders; (e) strengthening the present system of data collection and analysis and encouraging adequate and effective utilization of the data collected; and (f) developing a national strategy to promote the role and status of Malian women. The PRSD mission proposed that UNFPA concentrate on one of the eight regions (Sikasso) in order to test the proposed strategy during the period 1993-1996, with a view to replicating the approach in other regions in the future. The Government, having considered its priorities, the assistance being provided by various agencies, and the political implications of concentrating assistance in only one of the regions has asked UNFPA to expand operations to three regions, namely Sikasso, Gao and Tombouctou.

Maternal and child health and family planning

30. According to the national population policy, the Government intends to increase the contraceptive prevalence rate from the present 1.2 percent to 60 percent in 2020. UNFPA considers this objective to be too ambitious to attain in 28 years. UNFPA assistance in the area of MCH/FP aims at increasing the use of modern contraceptive methods among women of reproductive age from the present 1.2 per cent to 10 per cent in 1996; reducing the maternal mortality rate from the present 1,000 per 100,000 live births to 600 per 100,000 and reducing the infant mortality rate from the present 102 per 1,000 live births to 84 per 1,000 in 1996. In order to achieve these objectives, UNFPA would support the Government's strategy to involve non-health personnel and to decentralize and generate additional demand for family planning services. UNFPA strategy would focus on strengthening family planning services in the existing 56 urban and peri-urban health centres in five regions and expanding services into the remaining five urban health centres of these five regions as well as in 60 rural health units in the three UNFPA-priority regions.

31. The Fund's assistance would concentrate on integrating family planning services into existing MCH centres and developing an outreach family planning programme for rural areas in the three priority regions. Support would be provided to train medical and paramedical staff, traditional birth attendants (TBAs), extension workers, and to provide equipment, essential drugs and contraceptives. The contraceptive mix would include condoms, which would also be used to increase awareness about the prevention of AIDS and other STDs. The strategy utilized in this sector would be based on the Safe Motherhood approach and the conclusions and recommendations of the survey discussed above on problems affecting the reproductive health of Malian women, such as teen-age pregnancy and circumcision. National execution would be encouraged, with technical backstopping from WHO and the UNFPA Country Support Team based in Dakar, Senegal. Operations research on such subjects as contraceptive requirements, the determinants of maternal mortality and the underlying causes of infant mortality would be arranged through the National School of Medicine. UNFPA would provide a total amount of $2.3 million for MCH/FP activities, of which $700,000 would be sought from other sources, including multi-bilateral sources.

Information, education and communication

32. In view of the absence of a national IEC strategy, the relatively low impact of family planning activities, the uncoordinated manner in which non-formal IEC has been carried out, the existence of several unexplored traditional and modern channels of communication, and the embryonic nature of the formal population education programme, the PRSD mission recommended that the IEC sector should be UNFPA's first priority during the third programme period. The main objective of UNFPA assistance to this sector would be to ensure adequate IEC support for all population activities in the country. The most important activities of the proposed strategy are to: (a) create an intersectoral IEC committee to conceptualize, orient and coordinate population IEC activities; (b) develop a national IEC strategy; and (c) produce IEC materials to sensitize all parts of Malian society on the importance of population issues. Other activities include: (a) continuing the introduction of family life and population education into the formal school system; (b) strengthening IEC capacity, especially the "Association Malienne pour la Protection et la promotion de la Famille" (AMPPF); and (c) monitoring and evaluation of the quality and impact of communication programmes on Malian society, particularly in the evolution of the use of contraceptives.

33. In the area of formal population education, UNFPA's strategy would be to continue to support the introduction, on a pilot basis, of the concepts and notions of population and family life education into the formal school system with particular emphasis on responsible parenthood, AIDS prevention, and the

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environment. Support would be given to consolidate the first phase of the programme and to experiment with the newly developed curriculum by providing funds to develop training materials, conduct study tours for teachers, set up a documentation centre, procure reprographic equipment and pay for transport.

34. In the area of non-formal population education, UNFPA assistance would focus on developing a national consensus in favour of the recently adopted national population policy. This would be achieved by integrating IEC elements into the population policy implementation plan; elaborating sectoral IEC strategies; mobilizing the human resources of the public, private and NGO institutions concerned; strengthening institutional capacities for dissemination of information on population problems; establishing a sociocultural databank, including an inventory of available IEC materials; broadcasting regular programmes on population issues; and introducing population education into functional literacy programmes and into the sensitization and information seminars designed for political leaders and opinion makers. Close collaboration and cooperation would be sought with UNFPA's partner agencies in the Joint Consultative Group on Policy (JCGP) and with other agencies active in the population field. UNFPA would provide a total amount of $1.4 million for the IEC sector, of which $400,000 would be sought from other sources, including multi-bilateral sources.

Data collection and analysis

35. The main objective in the area of data collection and analysis would be to make accurate socio-demographic data available for development planning and other uses. UNFPA would therefore provide assistance to enable Mali to participate in a subregional survey on migration and urbanization and to carry out the preparatory activities for the third population census planned for 1997. UNFPA would also provide technical assistance to other sectors to conduct the baseline surveys needed to design population activities. UNFPA would allocate $300,000 for data collection and analysis activities, of which $200,000 would be sought from other sources, including multi-bilateral sources.

Population policy formulation

36. The existing national institutions (the Population Unit and GECAPOP) charged with implementing the new national population policy, do not respond adequately to the requirements of the policy in terms of conceptualization and programme management, monitoring or evaluation. In order to make the new national population policy a reality, the Government proposes to create new national and regional structures to help orient and coordinate the programme.

37. The main objective of UNFPA assistance in this area would be to help build up national capacity to implement the national policy effectively by sponsoring training activities in the Population Unit and the National Bureau for the Coordination of Population programmes (BUNACOP). UNFPA would provide support for technical assistance to develop an implementation and staff training plan. The World Bank plans to provide assistance to strengthen institutional capacity, provide equipment and secure office space. UNFPA would allocate a total of $650,000 to this sector, of which $500,000 would be sought from other sources, including multi-bilateral sources.

Women, population and development

38. UNFPA assistance in the area of women, population and development would focus on assisting the Government in developing a national strategy to promote the role and status of women that would include

linkages to population variables. UNFPA would provide assistance to the State Secretariat for Women's Promotion to help it develop a coherent, coordinated approach to improving the role and status of women, secure the collaboration of the Government, NGOs, particularly AMPPF, and donor agencies working in this area, and make use of all relevant documentation, such as legal texts and research studies, to develop the national strategy.

39. The Fund would support efforts to consolidate the achievements of the women, population and development components of the two previous programmes by, for example, providing funds to publish in a popular format the results of the study on Malian women discussed above and of the legal and religious texts protecting the rights of women and children. UNFPA would provide assistance for IEC activities and for training of trainers with the aim of promoting family planning and Safe Motherhood. It could also work through the mass media and other communication channels to eliminate traditional practices that adversely affect women's health and to promote Safe Motherhood. The proposed programme would provide assistance to the women's promotion centres in the rural areas of Bla and Ouelessebougou. These centres would be assisted in providing IEC support for the family planning outreach programme. A total amount of $350,000 would be allocated for women, population and development activities, of which $200,000 would be sought from other sources, including multi-bilateral sources.

Programme reserve

40. An amount of $200,000 would be set aside as a reserve to cover unforeseen activities that may be developed within the context of the proposed programme.

Programme coordination

41. The Ministry of External Affairs and International Cooperation is responsible for the overall coordination of all external assistance, while the Ministry of Finance, Economy, and Planning coordinates all population activities in the country. Operational activities to implement the national population policy are coordinated by BUNACOP. Members of the Joint Consultative Group on Policy (JCGP) have synchronized their programming cycle. Under the auspices of the Resident Coordinator for United Nations operational activities, the meetings of the JCGP and other agencies of the UN system would be continued. UNFPA would institute quarterly meetings with UNICEF, USAID, and the World Bank in order to facilitate effective coordination of donor support for the implementation of the national population policy.

Programme monitoring, evaluation and management

42. UNFPA's programme of assistance would be monitored and evaluated in accordance with standard UNFPA procedures and requirements. A mid-term review of the programme would be organized in November 1994 and a final review would take place towards the end of 1996. All activities would have built-in monitoring and evaluation components to verify implementation at regular intervals and to assess the results and contributions of programme activities to the achievement of the overall goals of population activities in the country. The programme would be monitored by the UNFPA Country Director and his support staff, under the overall guidance and support of the UNFPA Representative. UNFPA would make full use of available and appropriate technical assistance, complemented by the UNFPA Country Support Team located in Dakar, Senegal.

Financial summary

43. As indicated in paragraph 1, UNFPA would provide assistance to Mali in the amount of $5.2 million over the four-year period 1993-1996, of which $3.2 million would be programmed from UNFPA's regular resources. UNFPA would seek to provide the balance of $2 million from a combination of UNFPA regular resources and other resources, including multi-bilateral resources, when and to the extent such additional resources become available. The breakdown by programme area is as follows:

	UNFPA regular resources $	Other resources $	Total $
Maternal and child health and family planning	1,600,000	700,000	2,300,000
Information, education and communication	1,000,000	400,000	1,400,000
Data collection and analysis	100,000	200,000	300,000
Population policy formulation	150,000	500,000	650,000
Women, population and development	150,000	200,000	350,000
Programme reserve	200,000	---	200,000
TOTAL	3,200,000	2,000,000	5,200,000

V. RECOMMENDATION

44. The Executive Director recommends that the Governing Council:

(a) Approve the programme for Mali in the amount of $5.2 million for the four-year period 1993-1996;

(b) Authorize the Executive Director to programme, subject to the availability of funds, an amount of $3.2 million from UNFPA's regular resources, over the period 1993-1996;

(c) Further authorize the Executive Director to seek to provide the balance of $2 million of the approved programme from a combination of UNFPA regular resources and other resources, including multi-bilateral resources, when and to the extent such additional resources from any of the above sources become available;

(d) Authorize the Executive Director to allocate the funds and make appropriate arrangements with the Government of Mali and with the executing agencies.